1995-96 SESSION COMMITTEE HEARING RECORDS

Committee Name:

Joint Committee on Finance (JC-Fi)

Sample:

Record of Comm. Proceedings ... RCP

- > 05hrAC-EdR_RCP_pt01a
- > 05hrAC-EdR_RCP_pt01b
- > 05hrAC-EdR_RCP_pt02

- > Appointments ... Appt
- > **
- > Clearinghouse Rules ... CRule
- > **
- > Committee Hearings ... CH
- > **
- ➤ <u>Committee Reports</u> ... CR
- > **
- Executive Sessions ... ES
- > **
- > <u>Hearing Records</u> ... HR
- > **
- Miscellaneous ... Misc
- > 95hrJC-Fi_Misc_pt81
- Record of Comm. Proceedings ... RCP
- > **

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7868 Madison, WI 53707-7868

September 18, 1995

federal grants FB has them. File

Carol Skornicka, Secretary
Department of Industry, Labor and
Human Relations
201 E. Washington Avenue
Madison, WI 53703

Migrant and Seasonal Farmworker Program (Section 402), State Application Identifier Number WI950310-053-N17247XX

Dear Secretary Skornicka:

The Wisconsin Department of Administration, the State Grant Review Clearinghouse, has reviewed the application for federal funding assistance. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sinterely,

Jeff Smith Section Chief Federal-State Relations

Division of Energy and Intergovernmental Relations

A copy of this letter must be transmitted to the federal granting agency with your application.

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50) Federal-State Relations Office fp.1. S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

		Agency LD. (Classes)
1 Applicant Agency	CFDA# 17.247	
Dept. of Industry, Labor & Human Relations	Federal Agency to Receive Request	
(Street/City/State/Zip)	U. S. Dept. of Labor	
201 E. Washington Ave., P. O. Box 7946	Period of Funding Mo/Day/Year 7	Application Due Date
Madison, WI 53707-7946	07/01/95	Mo/Day/Year
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Susan Huss Phone 268-3338	Executive Order 12372 Review Requirements	red 10 Area of impact
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 12, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 South Webster Street, 5th Floor Madison, WI 53702

> National Pollutant Discharge Elimination System (WI Waterbody System/Reach File 3 Indexing), State Application Identifier Number WI950901-255-N66463XX

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

A copy of this letter must be transmitted to the federal granting agency with your application.

Department of Adi Form DOA-7020 (Formerly FDA 50)	R 5-88)	ا ، ا	, , S	ystemy	on Els	. /			
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 11, 1995

Richard Lorang, Acting Secretary Department of Health and Social Services PO Box 7850 Madison, WI 53707-7850

> Social Services Research and Demonstration (Changing the Culture of Welfare), State Application Identifier Number WI950901-253-N93647YY

Dear Acting Secretary Lorang:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Sincerely,

James R. Klauser

Secretary

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Department of Admini Form DOA-7020 (R 5-8 (Formerty FDA 50)		Pas	~	-10 p	·		Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125	
1 Applicant Agency		, —	vices	2 CFDA #	9 3	6 4 7 3	Agency I.D. (Optional). DE3-126-01	
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 13, 1995

Alan Tracy, Secretary
Department of Agriculture,
Trade & Consumer Protection
2811 Agriculture Drive
PO Box 8911
Madison, WI 53708-8911

Plant and Animal Disease, Pest Control and Animal Care, State Application Identifier Number WI950901-252-N10025XX

Dear Secretary Tracy:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

A copy of this letter must be transmitted to the federal granting agency with your application.

Department of Administration Form DOA-7020 (R 5-88) (Formerty FDA 50)

Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 21, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 S. Webster Street, 5th Floor Madison, WI 53702

Leaking Underground Storage Tank (Brownfields), State Application Identifier Number WI950905-261-N66805XX

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Kladiser

Secretary

A copy of this letter must be transmitted to the federal granting agency with your application.

Department of Administration Form DOA-7020 (R 5-88) (Formedy FDA 50) Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Sox 7868 Medieon, W1 53707-7868 Telephone (608) 257-2125

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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7868 Madison, WI 53707-7868

September 25, 1995

Joe Leean, Secretary
Department of Health and Social Services
PO Box 7850
Madison, WI 53707-7850

Toxic Substances Compliance Monitoring Coop Agreement (EPA/TSCA Asbestos-in-Schools), State Application Identifier Number WI950821-240-N66701XX

Dear Secretary Leean:

The Wisconsin Department of Administration, the State Grant Review Clearinghouse, has reviewed the application for federal funding assistance. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

Jeff Smith, Section Chief Federal State Relations

Division of Energy and Intergovernmental Relations

A copy of this letter must be transmitted to the federal granting agency with your application.

Federal State Relations Office (Formspix Flass) Applicant Agency Department of Health & Social Services 2 CFDA # 6 6 7 0 1 3 Agency I.D. (Opennal)	WISCON	ISIN FEDERAL GRANT	APPLICATION NOTICE FO	RM H-774-1
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Authorizations Source Classifing Positions Source	1 Applicant Agency Department of Health		12 [
Madison, WI 53703 Contact Person Terry Moon Phone 266-8579 Period of Funding ModPay/Year 7 Application Due Date 10/01/95 08/01/95	4 Address (Street/City/State/Zip)			
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Amendment-to-Current Grant Continuation-Modified Discretionary Discretionary Continuation-Modified Discretionary Discretionary All All Sumber of Years Previously Funded Lan All Funding, Allotment and Position Data (including Federal indirect costs) Total Federal Funds Applied For \$178,000 Numeric Appropriation Source Revenue Type Amount New Positions No. (FTE) Type No. (FTE) Type Sisting Positions No. (FTE) Type Amount No. (FTE) Type Ois Sisting Positions No. (FTE) Type Ois Sisting Positions No. (FTE) Type No. (FTE) Type No. (FTE) Type No. (FTE) Type Amount Sisting Positions No. (FTE) Type No. (FTE) Type No. (FTE) No Sisting Positions No. (FTE)	11 Type of Application		Clearinghouses: Notified Dates	
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Total Federal Funds Applied For \$178,000 Numeric Appropriation Source Revenue Type Amount No. (FTE) Type 149 Federal Prog Revenue PRO \$ 178,000 S 59,400 S 59,400 S 59,400 S S S S S S S S S S S S S S S S S S		Other		0 =
Total Federal Funds Applled For \$178,000 Numeric Appropriation Source Revenue Type Amount No. (FTE) Type 149 Federal PRF \$178,000 184 Prog Revenue PRO \$59,400 (in kind) \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	14 Funding, Allotment and Position Data	Con (including Federal Indirect costs)		
149 Federal PRF \$ 178,000 3 PERM 184 Prog Revenue PRO \$ 59,400 3 PERM 184 S S S S S 185 Indirect Cost Reimbursement Yes Rate 13.2% Base \$88,050 Amount \$11,625 Indirect Cost Reimbursement Richard W. Lorang Deputy Secretary 185 Indirect Cost Reimbursement Signature Title if other than Agency Secretary 186 Authorizations Authorizations Richard W. Lorang Deputy Secretary 187 Popular Signature Title if other than Agency Secretary 188 PERM PRF S 178,000 3 PERM 189 PERM PERM PERM PERM PERM PRF PERM PERM PRF PERM PERM PERM PRF PERM PERM PERM PRF PERM PERM PERM PRF PERM PE	Total Federal Funds Applied For \$ Numeric	178,000		
State Progress P	1/0		ount No. (FTE) Type	No. (FTE) Type
(in kind) S S S S S S S S S S S S S		· === · · ·		3 PERM
S S S S S S S S S S S S S S S S S S S	110g Revent	-	,400	
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S S S S S S S S S S S S S S S S S S S				
S Indirect Cost Reimbursement Yes Rate 13.2% Base \$88,050 Amount \$11,625 No				
Is Indirect Cost Reimbursement Yes Rate 13.2% Base \$88,050 Amount \$11,625 No Authorizations Authorized Agency Representative (Type or Print) Richard W. Lorang Deputy Secretary Date 7.28.25 FOR DEPARTMENT OF ADMINISTRATION USE ONLY Reviewing Analyst Cul Carlon SAI Number (2750801-2410-N)				
Sal Number Sal	15 Indirect Cost Reimbursement			
Authorizations Authorized Agency Representative (Type or Print) Richard W. Lorang Deputy Secretary Date 7.28.25 FOR DEPARTMENT OF ADMINISTRATION USE ONLY Reviewing Analyst Cul Phone Phone Recommendations Authorized Agency Representative (Type or Print) Richard W. Lorang Deputy Secretary Date 7.28.25 FOR DEPARTMENT OF ADMINISTRATION USE ONLY SAI Number W 1750801-3410-N	Yes Rate 13.2%	Base \$88,050	Amount \$11,625	
Delegated Review Signature FOR DEPARTMENT OF ADMINISTRATION USE ONLY Reviewing Analyst Cul Carlon Phone 1-954 SAI Number W 1950801-240-N	16 Authorizations	Authorized Agency Represent	stive (Type or Print) Title if other than	
FOR DEPARTMENT OF ADMINISTRATION USE ONLY Reviewing Analyst Cul Caplons Ly Phone 7-954 SAI Number W 1950821-240-N	C Calacated Souland		g Deputy Se	cretary
Reviewing Analyst Jul Jahlonshy Phone 7-954 SAI Number WI950801-240-N	Delegated Review	Rieland	•	1.7
Reviewing Analyst Lil Jahlonsky Phone 7-954 SAI Number WI950801-240-N	RESERVED TO THE PROPERTY OF THE	R DEPARTMENT OF ADM	NISTRATION USE ONLY	
Sommonday	Reviewing Analyst Lul (ya	A I m n D = 0	Q = (X/	795082 LICH-1
	Recommendation: Approve	☐ Approve With Conditions		1 - 1 - 1 /-
Signature	Signature		, , , , , , , , , , , , , , , , , , , ,	
	COMMENTS:		Date Due	
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Comments Continued on Reverse or on a Separate Sheet

Department of Administration Form DOA-7020 (R 5-88)

6th Floor

(Formerly FDA 50)

Federal-State Relations Office 101 S. Webster St.,

P.O. Box 7868 Madison, WI 53707-7868 Telephone 508/267-2125

$\lceil \cdot \rceil$	Appliicant Agency		2 N/A		3 Agency FD. (Optional)
	Dept. of Industry, Labor & Human	n Relations	CFDA #		VAR 18-96
1	Address (Street/City/State/Zip)		5 Federal Agency to	Receive Reque	
	210 E. Washington Ave., P. O. B	ox 7946	U. S. Dept. of La	bor	
	Madison, WI 53707-7946		a Period of Funding	Mo/Day/Year	7 Application Due Date
	Contact Person		7/1/95	ļ i	Mo/Day/Year
	Sue Gleason	Phone 266-8012	6/30/96		5/15/95
8	Agency Project Title		g Executive Order 12	372 Review	10 Area of Impact
	NOICC-BAG		Required		Counties/States
			☐ Yes	⊠ No	
11	Type of Application	12 Type of Assistance	Clearinghouses: Notified	Dates	Statewide
	New Grant	Grant			
	Amendment to Current Grant	☐ Formula			
	Continuation-Unchanged	Discretionary			
	Continuation-Modified	Other			
13	Number of Years Previously Funded	more than 6 years	All		
14	Funding, Allotment and Position Data	(including Federal indirect cos	ts)		
	Total Federal Funds Applied For	142,808			
1	Numeric		New	Positions	Existing Positions
Арр	ropriation Source	Revenue Type Am	ount No. (FTE) Type	No. (FTE) Type
141	Federal	PR-F \$ 142,39	91		1.72 Perm
153-	Indirect Federal	PR-F \$ 417			
		\$			
		\$			
		\$		***************************************	
		s			
		\$			
		\$			
15	Indirect Cost Reimbursement				L
	Yes Rat .00685 Salaries		•	117	□ No
18 4	Authorizations	Authorized Agency Represer	ntative (Type or Print)	Title if other	than Agency Secretary
		Susan Husa		Budget An	alyst
	□ Delegated Review	Signature Summe XX	1.00	Date 5/	11/05
	FOR	DEPARTMENT OF ADM	MINISTRATION LISE	ONLY	9/4
Revi	ewing Analyst	Canto Phone		SAI Number	WEQ50522-184
	ommendation: Approve			Date	
	ature	Date		Baseived	7 23 795 00
_	IMENTS:			טמופיטופי	
JOIN	· ·				Well X

Department of Administration Form DOA-7020 (R 5-88) (Formerty FDA 50) Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

1 Appliicant Agency		2 17.80	1& ****	Agency I.D: (Optional)
Dept. of Industry, Labor & Human	Relations	CFDA # 1 7 .	8 0 4	THE PROPERTY OF THE PARTY OF TH
4 Address (Street/City/State/Zip)		5 Federal Agency to F	Receive Request	
210 E. Washington Ave., P. O. Bo	x 7946	U. S. Dept. of Lab	•	
Madison, WI 53707-7946		e Period of Funding M		Application Due Date
Contact Person		10/01/95	-	Mo/Day/Year
Jack Bischel	Phone 267-7277	09/30/96		08/28/95
s Agency Project Title		9 Executive Order 123	72 Review Required	
Disabled Veterans Outreach Progr	ram (DVOP)			Counties/States
Local Veterans Employment Repre	esentative(LVER)	☐ Yes \	⊠ No ✓	
11 Type of Application	12 Type of Assistance	Clearinghouses: Notified	Dates	Statewide
New Grant	Grant	_	· (C)	
Amendment to Current Grant	Formula	N/1 A	W	
Continuation-Unchanged	Discretionary			
Continuation-Modified	Other		F.0	
13 Number of Years Previously Funded	More than 5 Yrs.	All		
Funding, Allotment and Position Data (including Federal indirect cos	ts)		,
Total Federal Funds Applied For	\$3,593,000			
Numeric		New F	ositions	Existing Positions
Appropriation Source	Revenue Type Am	nount No. (FTE)	Type N	o. (FTE) Type
El (151) Federal	PR-F \$	3,579,736		57.7 Perm.
E3 (153) Federal	PR-F \$	13,264		
	\$			
	\$			
	\$			
	\$			
	\$			
	S			
15 Indirect Cost Reimbursement		L L		
Yes Rate .75%	Base \$1,768,69	93 Amount \$13	3.264	⊓ No
16 Authorizations	Authorized Agency Represe		, —	Agency Secretary
	Debbie Benish		Budget Analyst	
□ Delegated Review	Signature		Date	
	Debri Gens		8/28/95	
FOR	DEPARTMENT OF ADM	MINISTRATION USE	NEY -	
Reviewing Analyst Or and	(alas Phone		SAI Number 77	FACHALINE
Recommendation: Approve			Date Received	3-7-25-0P
Signature	Dat		Date Due	at the
COMMENTS:				75778 V
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	WISCONSI	N FEDERAL GI	RANT APPLIC	NOTA	OTICE FORM	5	
Popurtment of Adminis Form DOA-7020 (R 5-8 (Formerly FDA 50)	,	stigations ease Co			F	derai-State Relations Office 1 S. Webster St., 9th Floor D. Box 7955 adison, WI 53707-7965 japhone 605/257-2125	
1 Applicant Agency	\mathcal{M}		121	A# <u>93</u> •	₹1 5 0%		
	sion of Healt	. 11	5 Fede	A#	Receive Request		
4 Address (Street/C	aty/State/Zip) Health Stati	stics				ase Control & Pre	ventio
1 W. Wilso	n St., Room I	72	I		Mo/Day/Year 7 A	oplication Due Date	
Madison W	n St., Room I I 53701			9/1	1/95	Mo/Day/Year	
Eleanor Ca	utley	Phone 267-95	545	8/3	1/96	5/30/95	
8 Agency Project To	ile		g Exec	cutive Order 123	72 Review Bequired		4
	ıl Risk Factor	Survey		□ Yes (Ø No	Counties/States All Counties	
11 Type of Application	on 13	Type of Assistance	Clearin	ghouses: Notifi	od Detec		
New Grant	F*****	Grant	and the second s	no	WI		
Amendmer	nt to Current Grant	Formula				TWO	
Continuation	on-Unchanged	Discretionary			EO		
Continuation		Other		AII		\	
	Previously Funded						
14 Funding, Allotme		ncluding Federal Indir 0,417	ect costs)				
Total Federal Fur	nds Applied For	w,411		- Now i	Positions	Existing Positions	
Numeric Appropriation	Source	Revenue Type	Amount	No. (FTE)		No. (FTE) Type	
149	Federal	PR-F	\$ 90,417			.50 Proj.	
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			<u> </u>		<u></u>		
			\$				
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			\$				
			s				
				-			-
15 Indirect Cost Re	imbursement	15 /	22	2 / 9	ς .	□ No	
1	Rate 22.6	Base15.4		unt <u>3,48</u>	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		-
16 Authorizations	i	1	Representative (Type or Print)	Title if other than	· ·	
		Richard W	. Lorang		Acting Sec	HELALY	1
Deleg	ated Review	Signature C	Doca	NA.	5-2	5.75	
	**************************************	OR DEPARTMENT					1
Reviewing Analy	// ^(Arone	U	SAI Number (1950609-IF	12-N°
1	~_*	Approve With	7 -	Deny	Date Received	9-95	28
Signature			Date		Date Due	total,	1 X
COMMENTS:						`	

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50)	Vise.	a Regist	Nus	Federal-State Relations Office 101 S. Webster St., 5th Floor
Houth Pr	open for Tax	ra Regist	nes +	P.O. Box 7868 Medison, WI 53707-7868 Telephone 608/267-2125
MI Dept of Healt	h and Social Services	[2]	1:	Agency LD_(Optional)
4 Address (Street/City/State)	(Zio)	CFDA # 9 3		
1414 East Washin	gton Avenue, Room 96	[to Receive Reques	i i
Madison WI 5370	3-3044	Centers for	Disease Co	ntrol and Prevention
Contact Person		6 Period of Fundir	19 Mo/Day/Year 7	Application Oue Date
Tom Anderson	Phone 266-7089		/30/96	www.car
8/ Agency Project Title				05/26/95
	ern De-railment Health	Study	No No	Counties/States
11 Type of Application	12 Type of Assistance	Clearinghouses: No		Douglas County
New Grant	Grant	- January Marie San Marie	tified Oates	7
Amendment to Currer	nt Grant Formula	- h		
Continuation-Unchang	ged Discretionary	100	W	
Continuation-Modified		9	$ \int$ κ	
13 Number of Years Previously	Funded 1 Agreement	AII	=0	****
14 Funding, Allotment and Posi	tion Data (including Federal indirect co) (S(S)		
Total Federal Funds Applied			•	-
Numeric Appropriation Sou		New	Positions	Eviction Desix:
	Tierende Type	Amount No. (FTE) Type	Existing Positions No. (FTE) Type
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Indirect Cost Reimbursement				
Yes Rate	Base	Amount		ET
Authorizations	Authorized Agency Repres			X No
	Richard W. Lora	and tribe or built		
Delegated Review	Signature C	11118	Acting Sec	retary
	10.05	prono	Date	
	FOR DEPARTMENT OF AL		5-27	- 745
			UNLY ' :::	
eviewing Analyst	Saklow Byrone		SAI Number WI	950609-150-
ecommendation: 🔲 Appr	ove Approve With Condition	ons Deny (Date Received	6-9-95 12
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	Oate		ate Due	5000345 10
OMMENTS:			٧	
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WISCONSIN FEDERAL GRANT APPLICATION NOTICE FORM

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50)

Federal-State Relations Office 101 S. Webster St., 8th Floor P.O. Box 7865 Medicon, WI 53707-7865 Telephone 808/257-7406

1 Applicant Agency								Madison, WI \$370;	7-7868
Dent of II-	n141 ~ ~			2	·			Teinphone 606/287	
4 Address (Street/Ci	aith & Soc	ial Services			CFDA#_				
1 W. Wilson	St. P.O.			5	Federal Age	ncy to Rec	Sive Reco		40,90
Madison, WI	53701	ьох 309		\square N	ational	Cente	er for	Health Statist	
Contact Person		600	<i>y</i> .	6 F	eriod of Fur	nding Mo/	Dev/Yeer	7 Application Due De	<u>ics</u>
Ed Steichen		608,		Γ			CC-	Morpay/Year	ate
8 Agency Project Title	3	Phone 266	-0330			12-31		T)Z	/
	•			9 E	xecutive Orc	der 12372 F	leview Rep	ulred 10 Area of Impa	
_Vital Static	tice Coo-	rative Projec			-		-	Counties/St	ict lates
1 Type of Application	cics coope	rative Project 12 Type of Assistance	:t		☐ Yes	X	No		
New Grant		Grant	>0	Clea	ringhouses:	Notified	Dates	Statewid	е
Amendment to	Current Grant				ħ.	500	-100 #		
Continuation-L	Inchanged	Formula		***************************************	- V		10 H c		
Continuation-A	Modified	☐ Discretionar Other Fee fo	y r Samuel	-	······································	-			
3 Number of Years Pre	Viously Fundad			· —	* * * *				
4 Funding, Allotment a	nd Position Data	(including Federal in-	iranta		AII	-			
Total Federal Funds	Applied For *	<u>\$274.]66.00</u>	mect costs;						
Numeric		<u></u>	····		****				
Appropriation	Source	Revenue Type	Amoi	int	No.	ew Positio	ons	Existing Position	
149	FED	PRF			No. (F	IE)	Туре	No. (FTE) Ty	pe Pe
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ndirect Cost Reimburs	ement								
Yes Rate_	`	Base	•						
Authorizations			/	mour	ıt			⊠ No	- 1
		Authorized Agency F Richard W.	iepresentativ	e (Ty	pe or Print)	Title if	other than	Agency Secretary	
Delegated Re	aviou	Signature	rorang			Depu	ıty Sec	retary	
- 3		13.0	02		^	Date			
	FOR	DEPARTUMENT	80V	van	<u> </u>		S-4 -2	5	
	_ (DEPARTMENT	r ADHHI		Land				
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commendation:	Annual	¬ /	1 7		ンだも	SAI Nurr	nber 6)	450514-1	AL
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Department of Adm DOA-7020(R12/92)	Immur Immur	rodetic	ique	E CLA	U ir		Federal-Stat 101 E. Wilso P.O. Box 786 Madison, Wi Telephone 6	53707-7868
Applicant Ager	wisconsin Dand Social	epartment of Services	Health	2//	0A# <u>93</u>	944	3 Agency I.D. (Optional)
4 Address (Stree	v/City/State/Zip)					Receive Reque	et .	
	ilson Street,	P.O. Box 309)					Prevention
Contact Person			İ		od of Funding 0 <u>1/01</u>	Mo/Day/Year /96	7 Application Mo/Day	
James M. 8 Agency Project	Vergeront, MD	Phone 608/2	66-985		12/31	/96	09/20/95	,
	Surveillance &		nce		☐ Yes ((No		ties/States
New Gran	ent to Current Grant	2 Type of Assistance Grant Formula		Clearing	phouses: Notif	Dates Dates	Statev	ide
	ion-Unchanged	Discretionary Other Coopera				_ =		
	s Previously Funded	Agreeme			AII			<u> </u>
	ent and Position Data (i	ncluding Federal indi	rect costs)					
Total Federal For Numeric Appropriation	inds Applied For <u>\$894</u> Source	Revenue Type	Amo	unt	New No. (FTE)	Positions Type	Existing No. (FTE)	Positions Type
149	Federal	PRF	\$ 894,	550	0		5.2	Perm
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			\$			*		
			S					
				l				
			\$		***************************************			
			\$			•		
	mbursement Rate 13.2%	Base <u>\$213,8</u>			\$28,229			
16 Authorizations		Authorized Agency	Represental	tive (Typ	e or Print)		an Agency Secre	tary
₹₹ .		Richard W. 1	Lorang			Deputy Se	cretary	
≛⊠ Delega		Coldit C	~~	and		Date 8-34	-25	
	FO	R DEPARTMENT	OF ADMIR	HISTRA	TION USE	ONLY		2000
Reviewing Analys		plonsky i	Phone	7-95	46	SAI Number	W1950907	-267-N 9 93944X
Recommendation	: L Approve	Approve With C	Conditions		Deny (Date Received	<u> </u>	9 13744X
Signature			Date			Date Due	9-18	75
						· 	000	

		H-641-A
WISCONSIN FEDERAL GRANT Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50)	APPLICATION NOTICE I	Form { Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868
fair Housing In Fratin		Madison, WI \$3707-7968 Telephone 606/267-2125
1' Applicant Agency DOH - Bureau of Public Health 4 Address (Street/City/State/Zip)	CFDA # 14 * 4 1 0 5 Federal Agency to Receive Re	
Address (Street/City/State/Zip) 1414 E. Washington Ave., Room 96 Madison, WI 53703-3044		f Housing and Urban Developm
Contact Person (William Otto Phone 266-9337	April 1, <u>1997 - Marc</u> 31, 1999	h August 25, 1995
8 Agency Project Title Lead-based Paint Abatement in Low and Moderate Income Housing	9 Executive Order 12372 Review Ves V No.	Required 10 Area of impact Counties/States
11 Type of Application 12 Type of Assistance New Grant Grant	Clearinghouses: Notified Dat	Statewide
Amendment to Current Grant X Continuation-Unchanged X Discretionary		
L Continuation-Modified Other	AII	
Total Federal Funds Applied For \$418,846.	New Positions Dunt No. (FTE) Type	Existing Positions No. (FTE) Type
	,846	1.0 Proj
<u> </u>		
15 Indirect Cost Reimbursement		
Yes Rate 13.2% Base 16 Authorizations Authorized Agency Represen	Amount \$7,208 ative (Type or Print) Title if other	r than Agency Secretary
RICHARD W. LORAN Signature Signature	DEPUT Date	Y SECRETARY
POR DEPARITMENT, OF ADM	HEATEL TOHORE CHEY	1.25-85
Reviewing Analyst July abland	SAI Numbe	, WE950901-259-N
Recommendation: Approve V Approve With Condition		ved (-1-75 14
Signature Date COMMENTS:	Date Due _	Nex 1 410
* .		l×X

T. William Street • Plant Office Beautysh • Maddam WT 52707,77850 • Talkalama (1997) 18 1975

Form GCA-7020 (R 5-68) (Formerly FOA 50)

Federal-State Relations Office 101 S. Webster St., 5th Floor P.O. Sox 7868

			Mada	nox /868 Non, WL 53707-7868 None 608/257-2125
1 AcquicantAgency WI Dept of Health and	Social Services	2	. VIZTAGE	Sy LCL(Optional)
4 Address (Street/Charleton, 71-)		CFDA # 93 • 1	6 1 V	
West Wilson Street, Madison WI 53703	P.O. Box 309	Agency for Tox	ave Aequesi ic Substance	& Disease Registr
Contact Person		9 Pariod of Funding May	Daw Your 17 1 4 1	cation Que Cate
Bill Otto 8 Agency Project Lide	Phone 6-9337	09/29/9	5	40/Cay/Year
Agency for Toxic Subst	ance and Discour	9 Executive Order 12372 F	Service Service	20/93
AISUR - Sup	erfund)	· —	No No	Counties/States
11 Type of Application	12 Type of Assistance	•	/ s	tatewide
New Grant	Grant	Clearingnouses: Notified	Oates	
Amendment to Current Grant	☐ Formula	1-10	W - 11 -	
Continuation-Unchanged	Discretionary			
Continuation-Modified	Other Cooperative			
13 Number of Years Previously Funded		AII		
14 Funding, Allotment and Position Data	(including Federal indirect costs)			
Total Federal Funds Applied For \$3 Numeric	98,291	·		•]
Appropriation Source	Revenue Type Amo	New Pasitio		sting Positions
149 Federal	PRF \$ 398,		1704 NO. (F	Type
			5.0	Perm
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15 Indirect Cost Reimoursement				
Yes Rate 13.2%	Base214,894	Amount \$28,366		
of venouszages	Authorized Agency Regresentati		- · L No	
.ET	Kichard W. Lorang	l l	mer man Agency Se	cretary
Calegated Review	Signatura	ACT1	ng Secretary	
	6 Leveleir	provo	6.22-95	
FOI	R DEPARTMENT OF ADMIN	STRATION USE ONLY	73	
Reviewing Analyst Lul Da	blouskyphone n-	$q \rightarrow A$	1.9.00	(A) (D) (B) (A)
Recommendation: Approve [Approve With Conditions	☐ Deny Date Rec		-00 /-181-N
Signature	. Oate		Devie	-17-142
COMMENTS:		Cate Oue	- July	——— [16(
		•		XX

Occurrent of Administration Form 00A-7020 (R S-38) (Formerly FOA 50)	l Situated A	- Herta	Brank Rogine	Federal-State Relations Offit 101 S. Wedster St., 5th Floor P.C. Box 7868 Madison, Wi. 51707-7868 Telegnone 608/257-2125
DHSS/Div. of Health/	(2!		3 Agency LO_(Optional).
41 Aggress (Street/City/State/Zo) 1414 E. Washington Av	our cad of Tablic He		9 3 • 2 6 2 ency to Receive Reque	E Comment of the Comm
Madison WI 53702	enue		s for Disease	
Contact Person	-	6 Period of Fo	inding MorDay/Year!	7 Agglication Que Care
Terry Moen	Phone 608/266-8	U	9/30/95	Mo/Day/Year
8 Agency Project Title	riidiid 000/200-0.		9/29/96	05/26/95
Wisconsin SENSOR Pro	gram	la sectione of	rder IZIIZ Review Red	Uired 101 Area of Impact Countes/States
	~	Ye	s (No	Statewide
11 Type of Application	12 Type of Assistance	Clearingnouse:	s: Notified Dates	
☐ New Grant	Grant	h	2015	A
Amendment to Current Grant		1	-04ac	<u> </u>
Continuation-Unchanged Continuation-Modified	Other COOD . Agreeme			
3 Number of Years Previously Funder	Gunercoop.Agreeme	ntAii		
Funding, Allotment and Position Da	a (including Federal indirect co			
Total Federal Funds Applied For			•	•
Numeric			New Positions	Walasiaa Aasta
Appropriation Source	Revenue Type /		FTE) Type	Existing Positions No. (FTE) Type
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Authorizations	Authorized Agency Regress	entative (Type or Prin	rt) Title if other than	Agency Secretary
roo	Richard W.Lora	ıg	Acting S	ecretary
PAY Delegated Review	Signature (Care	-
	Kiedard	Dorond	5-18-	-25-
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	Approve With Condition	ns L Ceny	Date Received _	5-24-95
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Doportment of Administration DOA-7020(R12/92) Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868

							Telephone 508	HEU1-2123
1 Applicant Ager				2	⟨ h	ORT 3	Agency I.D. (O	ptionel)
Departmen	nt of Health	<u>& Social Servi</u>	ces		<u> </u>	• U D C		
· ·	t/City/State/Zip) Vashington Av	e., Room 96		5 Fede	ral Agency to Nuclea	Receive Reques ar Regulato	t ory Commis	sion
Madison	WI 53703			6 Perio	d of Funding	Mo/Day/Year 7		
Contact Person		 .			_1/	L/95	Mo/Day/	Year
Paul Schn		Phone 267-4	792			<u> 12/31/95</u>	W C	
8 Agency Project	ille			9 Exec	utive Order 12	2372 Review Requ	ired 10 Area of	Impact les/States
	ental Samplin	8			☐ Yes ⋌	No)		
11 Type of Applica		12 Type of Assistance		Clearing	incuses: Noti	iled Dates	State	wide
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Numeric	unds Applied For	423,300			Managa	Positions	Produktion of	
Appropriation	Source	Revenue Type	Ame	ount	No. (FTE)	Type	No. (FTE)	Positions Type
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15 Indirect Cost Re	eimbursement Rate <u>13.2%</u>	Base <u>\$35</u>	000	. Amoun	t <u>\$4</u> 6	20	□No	
16 Authorizations		Authorized Agency	·		Ŧ · • ·	Title if other tha		arv
}		Richard W.				3	Secretary	,
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Recommendatio	n: Approve	☐ Approve With (Condition	s 🗌	Deny	Date Received	3=10=	95 0
Signature			Date			Date Due	Hel	<u> </u>
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Comments Continued on Reverse or on a Separate Sheet

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50) Environh Educating Healt 1 Applicant Agency	nentally Haz	ardous Substance	Federal-State Relations Office 101 S. Webster St., 5th Floor P.O. Box 7868
Educatino Hoaly	th Professiona	le Ro:	Madison, WI 53707-7868 Telephone 608/267-2125
1 Applicant Agency		2	3 Approy i.Q. (Optional)
Wisconsin Dept o	of Health & Social	CFDA # 93 • 200	- (VPC)
4 Address (Street/City/State/Zip)	Services	in the state of th	
l W Wilson Street PO	Box 309	<u> </u>	ostande & Disease Registry
Contact Person WI 53701-030	9	6 Period of Funding Mo/Day/Year 10/1/95	7 Application Due Date Mo/Day/Year
Henry Anderson, M.D.	Phone2661253	9/30/96	9/7/95
8 Agency Project Title		9 Executive Order 12372 Review Req	uired 10 Area of Impact
ATSDR Professional Edu	cation .		Counties/States
		☐ Yes ☐ NO	Statewide
[2 Type of Assistance	Clearinghouses: Notified Dates	
New Grant Amendment to Current Grant	Grant	MOSTEC	<i>[</i>
Continuation-Unchanged	L Formula		
Continuation-Modified	L_I Discretionary Other Coop Agreemen		
13 Number of Years Previously Funded	6	AII	
14 Funding, Allotment and Position Data (i	including Federal indirect costs)		
Total Federal Funds Applied For	\$74,126		
Numeric		New Positions	Existing Positions
Appropriation Source	Revenue Type Amo	ount No. (FTE) Type	No. (FTE) Type
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15 Indirec	engangananggyyana s		
X Yes Rate 13.2%	Base 36,504	Amount4,819	□ No
16 Authorizations	Authorized Agency Representa		n Agency Secretary
F-1	Richard W. Loran		Secretary
X Delegated Review	Signature .	Date C - C	
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or taggetter and the	abla otia	NISTRATION USE ONLY	205
Reviewing Analys	AVIONS PHONE	1-9546 SAI Number L	01450013-1511-N4
Recommendation: Approve	Approve With Conditions	Deny Date Received	6395
Signature	Date	Date Due	DO(1)
COMMENTS:			

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 19, 1995

The Honorable James Doyle Attorney General Wisconsin Department of Justice 123 West Washington Avenue Madison, WI 53703

Criminal Justice Discretionary Grant (Statewide Intelligence System/WisLEIN), State Application Identifier Number WI950824-246-N16574XX

Dear Attorney General Doyle:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

WISCO	NSIN FEDERAL GRANT	T APPLICATION NOTICE FOR	20.5
Form DOA-7020 (R S-88) (Formerly FDA 50)			TM Federal-State Relations Office 101 S. Webster St., 5th Floor P.O. Box 7868
1 Applicant Agency	Listice Disc	retionary Grant	Madison, WI 53707-7868 Telephone 608/267-2125
Department of Ju		2 3	Agency I.D. (Optional)
4 Address (Street/City/State/Zip)	36766	CFDA#L_5• <u>5/_4</u>	Control of the Contro
123 W. Washingto	n Ave	5 Federal Agency to Receive Request	
Madison. WT 537	02	DOJ-Bureau of Justice	Assistance
Craig S. Klyve	Phone 608/267-133	6 Period of Funding Mo/Day/Year 7 01/01/96	Application Due Date Mo/Day/Year
8 Agency Project Title		12/31/96	08/18/95
Statewide Intelligen	ice System	9 Executive Order 12372 Review Requi	
(WisLEIN)	100,000	Yes No	Counties/States
11 Type of Application	12 Type of Assistance		State of
New Grant	Grant	Clearinghouses: Notified Dates	-Wisconsin
Amendment to Current Grant	Formula	- no all	
Continuation-Unchanged	Discretionary		
Continuation-Modified	Other	E0	
13 Number of Years Previously Funded	2	All	
14 Funding, Allotment and Position Data	(including Federal indirect costs)		
Total Federal Funds Applied For \$ Numeric	100,000.00		
Appropriation Source	Revenue Type Amo	New Positions ount No. (FTE) Type	Existing Positions
241Federal		Type	No. (FTE) Type
348 indirect Federal			1.00 Project
out rederal	- FR-F \$ 3,8	300	
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	<u> </u>		
Indirect Cost Reimbursement			
X Yes Rate 10%	Base \$38,000.00		
Authorizations		Amount\$3,800.00	□ No
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Delegated Review	Signature	. Accorn	ey General
— Delegated Heview	James >	Date	
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ecommendation; Approve	Phone (0 -	OA Nomber	15 0824- 246N
ignature Since Trend-	,	Deny Date Received	0 24-42 165 A
		Date Due	-1-1-9JT XX

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 22, 1995

John T. Benson State Superintendent Department of Public Instruction PO Box 7841 Madison, WI 53707-7841

> National School Lunch Program (FY96 State Administrative Expense Plan), State Application Identifier Number WI950905-262-N10555XX

Dear Superintendent Benson:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration

DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

1 Applicant Agence	y Wisconsin	Department	2	L'aux	Agency I.D. (O)	otional)
	<u>lic Instructi</u>	on		<u> </u>		
4 Address (Street				ral Agency to Receive Request		•
P.O. Box 7				Department of Ag		
Madison, V Contact Person	NI 53707		6 Perio	d of Funding Mo/Day/Year 7	Application Du Mo/Day/\	
1		Phone coo or	-6 3504	09/30/97	8/15/9	
a Agency Project	<u>. Mortensen</u> Tide	Phone 608-26	Q Evec	utive Order 12372 Review Requi		
B Agency Project FY 1996 St	tate Administ	trative Expense	= J CACC			es/States
(SAE) Plar	n			☐Yes		
11 Type of Applical	tion	12 Type of Assistance	Clearing	houses: Notified Dates	State	wide/WI
New Gran		Grant	Cicaring	D. AF E	<u> </u>	
	nt to Current Grant	X Formula		no with Co		
1	ion-Unchanged	Discretionary				
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13 Number of Year	s Previously Funded	More than 5 ye	ears	AII		
14 Funding, Allotm	ent and Position Data	(including Federal indi	rect costs)			
Total Federal Fu	ınds Applied For	\$1,417,533				
Numeric	, ,		_	New Positions	Existing F	Positions
Appropriation	Source	Revenue Type	Amount	No. (FTE) Type	No. (FTE)	Type
EQ	<u>Federal</u>	PR-F	\$ 1,417,533		17.00	Perm.
			\$			
DF	State	GPR	\$ 287,112		4.70	Perm.
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<u>D7</u>	Local	PRO	<u>\$ 162,732</u>		1.90	Perm.
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15 Indirect Cost Re	imburgament					
	Rate 6.1%	Base 1,289	.758 Amoun	t <u>\$78,675</u>	□No	
16 Authorizations	nate		Representative (Ty		n Agency Secret	200
16 Authorizations		John T. Be		_	perintende	· ·
П.,		Signature.	2115011	Date	<u>per incende</u>	
L Deleg	ated Review		Sensia	8/15/95		
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Signature	_ = =		Date	Date Due	1-01-7	
COMMENTS:						
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 22, 1995

John T. Benson State Superintendent Department of Public Instruction PO Box 7841 Madison, WI 53707-7841

> Nutrition Education and Training, State Application Identifier Number WI950905-263-N10564XX

Dear Superintendent Benson:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration

DOA-7020(R12/92)

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

1 Applicant Agency Department of Public	Instruction	2 CFDA # _1_0	.5 6 4 3	Agency I.D. (Optional)	
4 Address (Street/City/State/Zip)		5 Federal Agency to	o Receive Request		
125 S. Webster, P.O.	Box 7841	USDA-FNS.	MWRO Chica	o, IL	
Madison WI 53707-78	41	6 Period of Funding	Mo/Day/Year 7	Application Due Date	
	Phone (608) 266-3	1 <i>F</i>	/1/95	Mo/Day/Year	
Dean Gagnon A Agency Project Title	Phone (000) 200 - 3		30/96	8/15/95	
8 Agency Project Title		9 Executive Order 1	23/2 Heview Requir	ed 10 Area of Impact Counties/States	
<i>NET</i>		Yes	(X No)		ļ
	12 Type of Assistance	Clearinghouses: Noti	ified Dates		
New Grant	Grant	γ	10 50		
Amendment to Current Grant	Formula	140	Met LO		
Continuation-Unchanged	☐ Discretionary				
XX Continuation-Modified	Other 16	AII		***************************************	
13 Number of Years Previously Funded_ 14 Funding, Allotment and Position Data					
Total Federal Funds Applied For		,,,,,			
Numeric		New	Positions	Existing Positions	
Appropriation Source	Revenue Type	Amount No. (FTE		No. (FTE) Type	
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Yes Rate	Base	Amount _\$4,24		L No.	
16 Authorizations	l e	esentative (Type or Print)	•	Agency Secretary	
	John J. Benson		State Sup	<u>erintendent</u>	I
☐ Delegated Review	Signature of the same of the s	nes	Date		ı
	OR DEPARTMENT OF A		E ONLY		I
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Reviewing AnalystKob Cca	mer Phone	• 10-1422	SAI Number_W	1950105-263-N/0	564 x
Recommendation: Approve	Approve With Cond	itions Deny	Date Received .	9-5-95	
Signature / Co	Crowne Date	5-2-75	Date Due	9-21-95	
COMMENTS:					
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	e or on a Separate Sheet				

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address:
Post Office Box 7864
Madison, WI 53707-7864

September 22, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 South Webster Street, 5th Floor Madison, WI 53702

> Environmental Protection-Consolidated Research (Cooperative Agreement on International Effort/Amendment), State Application Identifier Number WI950918-271-N66500

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

Jamès R. Klauser

Secretary

A copy of this letter must be transmitted to the federal granting agency with your application.

Department of Ad Form DOA-7020 ((Formerly FDA 50	R 5-88)	1 1 0) (.	Resear Consolida	Pe 10 P.1 Wa	deral-State Rela 1 S. Webster St.,). Box 7868 dison, WI 53707	6th Floor	
<u>Enoi</u>	ronmon	al tro	Lection -	Consolida		lephone (608) 25	······	
Applicant Ag				CFDA# 66.500]3_1,	gency L.D. (Optio	nal)	
4 Address (Str 101 S. Webster Madison, WI 5				5 Federal Agency to Rec U.S. Environmental Pro	eive Request olection Agency			
Contact Per	50 0	608/266-0160		6 Period of Funding No/	05/19/94	pplication Due D lo/Day/Year 5/95	ale	
8 Agency Proje	ect Title Cooperative	Agreement on Intern	national Effort	9 Executive Order 12372		10 Area of In Counties,		
Type of Appli			pe of Assistance rank	Clearinghouses: Votified	Dates	N/A		
l	dment to Current Gr	1 =	Formula	h	o WI		· . · ·	
) 	ation-Unchanged ation-Wodified	01	Discretionary ther: Cooperative		60			
13 Number of Y	ears previously fund	Agree ed: One	ment		Ш			
i	etment and Position ands Applied For \$16. Source			- New Position:		Existing P No. (FTE)	ositions Type	
445	Federal	PR-F	\$ 16.650					
401	State	GPR	\$706			į		
801	State	GPR	\$170			· ·		
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lai.								
Indirect Cost	. Reimbursement Rate <u>24.087</u>	Ba	se \$ 706	Amount \$170		□ N°		
16 Authorization	ns		ized Agency Representativ I L. Bazzell	e (Type or Print)	Title if other than A Administrator —			
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Reviewing Analysi	Rug	o Ka	Quus 30	-6-1329	SAI Number L	II 950	918-2	71-1
Recommendation		rove D Ap	prove With Conditions	Q /am /QC	Date Received	7-18-	95	66
Signature 1	assign	Vagnu	Dale .	1120175	_ Date Due	/ U = C	<u> </u>	500

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 28, 1995

Michael J. Sullivan Secretary Department of Corrections PO Box 7925 Madison, WI 53707

> State Criminal Alien Assistance Program, State Application Identifier Number WI950928-278-N00000XX

Dear Secretary Sullivan:

The Department of Administration has reviewed the above noted grant application. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50) Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

Applicant Agency Wisconsin Department of	Corrections	2	CFDA	#•			ency LD. (Op	lional)
Address (Street/City/State/Zip) 149 E. Wilson Street		5	Federa De p	I Agency to a	Receive Requ of Just:	est Lce		
P.O. Box 7925 Madison, WI 53707 Contact Person		6	3 Period	10-1		7 A	pplication Du Mo/Day/Y	ear
Marsha Rathje	Phone 266-855	53			30-96		9-30-95	
Agency Project Title		9	Execut	ive Order 12:	372 Review Re	quired	10 Area of Countie	mpact es/States
SCAAP				Yes	No		Stat	٥
1 Type of Application 12 T	ype of Assistance		Clearingh	ouses: Notif	ied Dates	;	Adult	
	Grant	-					Institu	
	X Formula	- 1						
Continuation-Unchanged	Discretionary	[
	Other						l	
3 Number of Years Previously Funded	0			All				
4 Funding, Allotment and Position Data (inclu		costs)						
Total Federal Funds Applied For	8,536,580							
Numeric	Revenue Type	Amo	unt	New No. (FTE)	Positions Type	l l	Existing F No. (FTE)	ositions Type
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15 Indirect Cost Reimbursement								
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Recommendation: Approve	Approve With Co	ondition	s 🗆	Deny	Date Receiv	/ed	11281	4 /
Signature C- ARChe	Da	ate <i>9</i> /	128/	55	Date Due _		1/30/	۴/
COMMENTS:								

STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JÁMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 26, 1995

Joe Leean, Secretary
Department of Health and Social Services
PO Box 7850
Madison, WI 53707-7850

Safe and Drug Free Schools and Communities (Governor's Discretionary Program), State Application Identifier Number WI950614-167-N84186XX

Dear Secretary Leean:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Sincerely,

James R. Klauser

Sebretary

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50) Federal-State Relations Office 101 S. Webster St., 5th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

Safe and Drug Froe Schools and Communities Yes Xes X	Social Services 4 Address (Street/City/State/Zip) 1 West Wilson St. P.O. Box 7851, Madison, WI 53707 Contact Person Phone 8 Agency Project Title Safe and Drug Free Schools and Communities Governor's Discretionary Program Sept. 30, 1997 Federal Agency to Receive Request U.S. DOE/OESE 6 Period of Funding Mo/Day/Year 7 Application Due Date Mo/Day/Year July 1, 1995 Mo/Day/Year Sept. 30, 1997 June 20, 19 Executive Order 12372 Beview Required 10 Area of Impact Counties/States	
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 25, 1995

Charles H. Thompson Secretary Department of Transportation PO Box 7910 Madison, WI 53707-7910

> Federal Transit Technical Studies (Sec. 8 MPO Planning/Sec. 26(a)(2) (A) State Planning and Research), State Application Identifier Number WI950901-250-N20505XX

Dear Secretary Thompson:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Admi Form DOA-7020 (R 5 (Formerly FDA 50)	-88)		. 1	1 0		Federal-State Relations Offi 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868	
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 26, 1995

Cheryl L. Parrino, Chairman Public Service Commission of Wisconsin PO Box 7854 Madison, WI 53707-7854

> (Gas) Pipeline Safety, State Application Identifier Number WI950922-276-N20700XX

Dear Chairman Parrino:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

Jame's R. Klauser

Secretary

The State Application Identifier Number for this project should be submitted to the Federal funding agency with your application.

Department of Administration DOA-7020(R12/92)

Comments Continued on Reverse or on a Separate Sheet

Federal-State Relations Office 101 E. Wilson Street, 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone 608/267-2125

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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 25, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 S. Webster Street, 5th Floor Madison, WI 53702

> Hazardous Waste Management State Program, State Application Identifier Number WI950818-233-N66801XX

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Sedretary

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50)

Federal-State Relations Office 101 S. Webster St., 8th Floor P.O. Sex 7868 Medicon, WI 53707-7868

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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION 101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 25, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 S. Webster Street, 5th Floor Madison, WI 53702

> Air Pollution Control (Great Lakes Atmospheric Loading Monitoring Network), State Application Identifier Number WI950824-244-N66001YY

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

Form DOA-7020 (R 5-88 (Formerly FDA 50)	1	on Col	ndro1	Progra	101 P.O	eral-State Relations Office S. Webster St., 6th Floor b. Box 7868 dison, WI 53707-7868 ephone (608) 267-2125	
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STATE OF WISCONSIN DEPARTMENT OF ADMINISTRATION

101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 25, 1995

Darrell Bazzell, Administrator Office of Planning and Analysis Department of Natural Resources 101 S. Webster Street, 5th Floor Madison, WI 53702

> State Revolving Fund Capitalization Grant FY6, State Application Identifier Number WI950818-234-N66458XX

Dear Mr. Bazzell:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

This letter constitutes compliance with the requirements for State Clearinghouse review under Presidential Executive Order 12372. Regional clearinghouses which have comments will send review letters directly to you.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Secretary

Department of Administration Form DOA-7020 (R 5-88) (Formerly FDA 50) Federal-State Relations Office 101 S. Webster St., 6th Floor P.O. Box 7868 Madison, WI 53707-7868 Telephone (608) 267-2125

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STATE OF WISCONSIN
DEPARTMENT OF ADMINISTRATION
101 East Wilson Street, Madison, Wisconsin

TOMMY G. THOMPSON - GOVERNOR

JAMES R. KLAUSER SECRETARY



Mailing Address: Post Office Box 7864 Madison, WI 53707-7864

September 26, 1995

Alan Tracy, Secretary
Department of Agriculture,
Trade & Consumer Protection
2811 Agriculture Drive
PO Box 8911
Madison, WI 53708-8911

Plant and Animal Disease, Pest Control and Animal Care (Gypsy Moth Egg Mass Survey), State Application Identifier Number WI950922-274-N10025XX

Dear Secretary Tracy:

The Department of Administration has reviewed the above noted application for federal funding assistance. At the direction of the Governor of the State of Wisconsin, and pursuant to Wisconsin Statute 16.54, the Department is approving the application for submission to the federal funding authority. The application is in compliance with applicable state laws and is consistent with related state plans, programs and policies.

The Department encourages favorable federal action on this grant application which will serve the needs of Wisconsin's citizens.

Sincerely,

James R. Klauser

Sechetary

Department of A Form DOA-7020 (Formerly FDA S	dministration (R S-88) 0)	+ Anim Dispase	ما ا	are,		101 S. Webster St., 6th Flor P.O. Box 7868 Medison, WI 53707-7868	O.P
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